2007 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT #L37920 MEI HOLDINGS, INC.

FILED Mar 27, 2007 08:00 AN Secretary of State

Principal Place of Business

10625 PUCKETT ROAD PERRY, FL 32347

Mailing Address

10625 PUCKETT ROAD PERRY, FL 32347



03212007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3014524 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

C T CORPORATION SYSTEM

DO NOT WRITE

1200 S. PINE ISLAND ROAD PLANTATION, FL 33324			IN THIS SPACE		
	named entity submits this statement for the pions of registered agent.	purpose of changing its registered	i office or n	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or ponted name of registered agent and title if applicable. (NOTE, Registered			Agent signature required when reinstating) DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campalgn Financ Trust Fund Contribution.	ing 🔲	\$5.00 May Be Added to Fees	U00000680717 04/04/07-80012-007 317.50
10.	OFFICERS AND DIRECTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP YORK, ROY B. 3741 BOBBIN BROOK CIR TALLAHASSEE FL,				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HANKINS, HAROLD 103 SMITHFIELD DR BLACKSBURG VA,				
NAME STREET ADDRESS CITY+ST-ZIP	D CLARK, MARK E. ESS RT. 1, BOX 135E HOT SPRINGS, NC DS LANGNER, KEVEN K.			DO	NOT WRITE
TITLE				IN THIS SPACE	

12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other

SIGNATURE: __

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-719

TITLE

TITLE NAME STREET ADDRESS 196 GREEN HILLS RD

SLEIGHER, SUZANNE B 12025 201ST RD

LIVE OAK, FL 32064

CINCINNATI OH,

AS